

## U.S. Trustee Basic Monthly Operating Report

Case Name: MH EQUITY MANAGING MEMBER Date Filed: 6-12-2013Case Number: 13-06283 JKC 11 LLC SIC Code: 523900Month (or portion) covered by this report: JUNE, 2013

IN ACCORDANCE WITH TITLE 28, SECTION 1746, OF THE UNITED STATES CODE, I DECLARE UNDER PENALTY OF PERJURY THAT I HAVE EXAMINED THIS U.S. TRUSTEE BASIC MONTHLY OPERATING REPORT AND THE ACCOMPANYING ATTACHMENTS ON BEHALF OF THE CHAPTER 11 DEBTOR AND, TO THE BEST OF MY KNOWLEDGE, THIS REPORT AND RELATED DOCUMENTS ARE TRUE, CORRECT AND COMPLETE.

Phillip S. Scheffsky  
ORIGINAL SIGNATURE OF RESPONSIBLE PARTY

7-17-2013  
DATE REPORT SIGNED

PHILLIP S. SCHEFFSKY - ACCOUNTANT  
PRINTED NAME OF RESPONSIBLE PARTY AND POSITION WITH DEBTOR

The debtor is required to provide financial reports prepared by or for the debtor in addition to the information required by this form. The U.S. Trustee may permit the debtor to eliminate duplicative information. No such permission is valid unless in writing.

## QUESTIONNAIRE:

- |  | YES                                 | NO                                  |
|--|-------------------------------------|-------------------------------------|
| 1. IS THE BUSINESS STILL OPERATING?  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 2. DID YOU SELL ANY ASSETS OTHER THAN INVENTORY THIS MONTH?                    | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 3. HAVE YOU PAID ANY BILLS YOU OWED BEFORE YOU FILED BANKRUPTCY?               | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 4. DID YOU PAY ANYTHING TO YOUR ATTORNEY OR OTHER PROFESSIONALS THIS MONTH?    | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 5. DID YOU PAY ALL YOUR BILLS ON TIME THIS MONTH?                              | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 6. DID YOU PAY YOUR EMPLOYEES ON TIME?   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 7. HAVE YOU FILED ALL OF YOUR RETURNS AND PAID ALL OF YOUR TAXES THIS MONTH?   | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 8. DID YOU PAY ALL OF YOUR INSURANCE PREMIUMS THIS MONTH?                      | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 9. DID ANY INSURANCE COMPANY CANCEL YOUR POLICY THIS MONTH?                    | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 10. HAVE YOU BORROWED MONEY FROM ANYONE THIS MONTH?                            | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 11. DO YOU HAVE ANY BANK ACCOUNTS OPEN OTHER THAN THE DIP ACCOUNT?             | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 12. DID YOU HAVE ANY UNUSUAL OR SIGNIFICANT UNANTICIPATED EXPENSES THIS MONTH? | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |

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- |  | YES                                 | NO                                  |
|--|-------------------------------------|-------------------------------------|
| 13. DID YOU DEPOSIT ALL MONEY FOR YOUR BUSINESS INTO THE DIP ACCOUNT THIS MONTH?                       | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 14. DID THE BUSINESS SELL ANY GOODS OR PROVIDE SERVICES TO ANY BUSINESS RELATED TO THE DIP IN ANY WAY? | <input type="checkbox"/>            | <input checked="" type="checkbox"/> |
| 15. DO YOU PLAN TO CONTINUE TO OPERATE THE BUSINESS NEXT MONTH?  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |
| 16. ARE YOU CURRENT ON YOUR QUARTERLY FEE PAYMENT TO THE UST?  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            |

## TAXES

DO YOU HAVE ANY PAST DUE TAX RETURNS OR PAST DUE POSTDEPOSITION TAX OBLIGATIONS? ☐ YES ☒ NO

IF YES, PLEASE PROVIDE A WRITTEN EXPLANATION INCLUDING WHEN SUCH RETURNS WILL BE FILED, OR WHEN SUCH PAYMENTS WILL BE MADE AND THE SOURCE OF THE FUNDS FOR THE PAYMENT.

(Exhibit A)

## INCOME

PLEASE SEPARATELY LIST ALL OF THE INCOME YOU RECEIVED FOR THE MONTH. THE LIST SHOULD INCLUDE ALL INCOME FROM CASH AND CREDIT TRANSACTIONS. [If you use an automated accounting system, please attach a copy of the Income Statement and Balance Sheet.]

TOTAL INCOME

NONE

(Exhibit B)

## EXPENSES

PLEASE SEPARATELY LIST ALL EXPENSES PAID BY CASH OR BY CHECK FROM YOUR BANK ACCOUNTS PAID THIS MONTH. INCLUDE THE DATE PAID, WHO WAS PAID THE MONEY, THE PURPOSE AND THE AMOUNT. [If you use an automated accounting system, please attach a copy of the Disbursements Journal, otherwise attach a copy of the check register.]

TOTAL EXPENSES

113.376/30/13 NATIONAL BANK OF INDIANAPOLIS  
BANK SERVICE CHARGE (Exhibit C)

\$ 113.37

CASH PROFIT

INCOME FOR THE MONTH (TOTAL FROM EXHIBIT B)

EXPENSES FOR THE MONTH (TOTAL FROM EXHIBIT C)

(Subtract The Total from Exhibit C from the Total of Exhibit B)

CASH PROFIT FOR THE MONTH (\$ 113.37) LOSS

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Case Name: MH. EQUITY MANAGING MEMBER Date Filed: 6-12-2013Case Number: 13-06283 JKC 11 LLC SIC Code: 523900Month (or portion) covered by this report: JUNE, 2013

## UNPAID BILLS

PLEASE ATTACH A LIST OF ALL DEBTS (INCLUDING TAXES) WHICH YOU HAVE INCURRED SINCE THE DATE YOU FILED BANKRUPTCY BUT HAVE NOT PAID. THE LIST MUST INCLUDE THE DATE THE DEBT WAS INCURRED, WHO IS OWED THE MONEY, THE PURPOSE OF THE DEBT AND WHEN THE DEBT IS DUE.

TOTAL PAYABLES

NONE

(Exhibit D)

## MONEY OWED TO YOU

PLEASE ATTACH A LIST OF ALL AMOUNTS OWED TO YOU BY YOUR CUSTOMERS FOR WORK YOU HAVE DONE OR THE MERCHANDISE YOU HAVE SOLD. YOU SHOULD INCLUDE WHO OWES YOU MONEY, HOW MUCH IS OWED AND WHEN IS PAYMENT DUE.

TOTAL RECEIVABLES

(X)(X) SEE SCHEDULES AND SOFA (EXHIBIT E)

## BANKING INFORMATION

PLEASE ATTACH A COPY OF YOUR LATEST BANK STATEMENT FOR EVERY ACCOUNT YOU HAVE AS OF THE DATE OF THIS FINANCIAL REPORT.

6/30/13 STATEMENTS ARE ATTACHED

## EMPLOYEES

NUMBER OF EMPLOYEES WHEN THE CASE WAS FILED?

NONE

NUMBER OF EMPLOYEES AS OF THE DATE OF THIS MONTHLY REPORT?

NONE

## PROFESSIONAL FEES

TOTAL PROFESSIONAL FEES APPROVED BY THE COURT DURING THIS REPORTING PERIOD?

NONE

TOTAL PROFESSIONAL FEES APPROVED BY THE COURT SINCE THE FILING OF THE CASE?

NONE

TOTAL PROFESSIONAL FEES INCURRED BY OR ON BEHALF OF THE DEBTOR DURING THIS REPORTING PERIOD?

\$49,307.00

TOTAL PROFESSIONAL FEES INCURRED BY OR ON BEHALF OF THE DEBTOR SINCE THE FILING OF THE CASE?

\$49,307.00

PROFESSIONAL FEES INCURRED BY OR ON BEHALF OF THE DEBTOR RELATED TO BANKRUPTCY DURING THIS REPORTING PERIOD?

\$49,307.00

PROFESSIONAL FEES INCURRED BY OR ON BEHALF OF THE DEBTOR RELATED TO BANKRUPTCY SINCE THE FILING OF THE CASE?

\$49,307.00

## U.S. Trustee Basic Monthly Operating Report

Case Name: MHEQUITY MANAGING MEMBER Date Filed: 6-12-2013Case Number: 13-06283 JKC 11 LLC SIC Code: 523900Month (or portion) covered by this report: JUNE, 2013

## PROJECTIONS

COMPARE YOUR ACTUAL INCOME, EXPENSES AND THE CASH PROFIT TO THE PROJECTIONS FOR THE FIRST 180-DAYS OF YOUR CASE PROVIDED AT THE INITIAL DEBTOR INTERVIEW.

PROJECTED INCOME FOR THE MONTH:

- 0 -

ACTUAL INCOME FOR THE MONTH (EXHIBIT B):

- 0 - 0.00

DIFFERENCE BETWEEN PROJECTED AND ACTUAL INCOME:

- 0 - 0.00

PROJECTED EXPENSES FOR THE MONTH:

- 0 -

TOTAL ACTUAL EXPENSES FOR THE MONTH (EXHIBIT C):

113.37 0.00

DIFFERENCE BETWEEN PROJECTED AND ACTUAL EXPENSES:

113.37 0.00

PROJECTED CASH PROFIT FOR THE MONTH:

- 0 - 0.00

ACTUAL CASH PROFIT FOR THE MONTH

(TOTAL FROM EXHIBIT B MINUS TOTAL FROM EXHIBIT C)

< 113.37 > 0.00

DIFFERENCE BETWEEN PROJECTED AND ACTUAL CASH PROFIT:

< 113.37 > 0.00

[If actual cash profit was 90% or less of projected cash profit, please attach a detailed written explanation.]



THE NATIONAL  
BANK OF INDIANAPOLIS

MH EQUITY MANAGING MEMBER LLC  
1120 LAURELWOOD  
CARMEL IN 46032

Date 6/28/13 Page 1 of 1  
Account Number 1373430  
Enclosures 4

----- CHECKING ACCOUNTS -----

COMMERCE CHECKING		Number of Enclosures	4
Account Number	1373430	Statement Dates	6/01/13 thru 6/30/13
Previous Balance	6,558.09	Days in the statement period	30
1 Deposits/Credits	20,000.00	Average Ledger	2,620
5 Checks/Debits	26,205.70	Average Collected	2,620
Service Charge	113.37		
Interest Paid	.00		
Ending Balance	239.02		

Deposits and Credits

Date	Description	Amount
6/11	Hilbert Trust - MH Equity xxx3315D- xxx3430D	20,000.00

Debits

Date	Description	Amount
6/11	WIREOUT FROST BROWN TODD LLC 20130611G4B74H1C000048	20,000.00
6/30	TOTAL SERVICE CHARGE *	113.37

Checks in Serial Number Order

Date	Check No.	Amount	Date	Check No.	Amount
6/03	2147	2,295.71	6/18	2149	688.49
6/03	2148	200.00	6/18	2150	3,021.50

\*Indicates skip in Check Number

Daily Balance Information

Date	Balance	Date	Balance	Date	Balance
6/01	6,558.09	6/11	4,062.38	6/30	239.02
6/03	4,062.38	6/18	352.39		



THE NATIONAL  
BANK OF INDIANAPOLIS

Date: 6/28/2013 Page: 2 of 2  
Primary Account: 1373430

**MH EQUITY MANAGING MEMBER LLC**  
1120 LAURELWOOD  
Carmel, IN 46033-8747

NATIONAL BANK OF INDIANAPOLIS  
20-807740

2147

6/28/2013

PAY TO THE ORDER OF **BMW Financial Services**

Two Thousand Two Hundred Ninety-Five and 71/100 \*\*\*\*\*

\$ 2,295.71

DOLLARS

BMW Financial Services  
PO Box 9001065  
Louisville, KY 40290-1065

MEMO 4001437068

\*002147\* \*074006674\* 1373430\*

Check 2147 Amount \$2,295.71 Date 6/3/2013

**MH EQUITY MANAGING MEMBER LLC**  
1120 LAURELWOOD  
Carmel, IN 46033-8747

NATIONAL BANK OF INDIANAPOLIS  
20-807740

2148

6/28/2013

PAY TO THE ORDER OF **Sue Faust Chenoweth, CPA**

Two Hundred and 00/100 \*\*\*\*\*

\$ 200.00

DOLLARS

Sue Faust Chenoweth, CPA  
7329 Eastwick Lane  
Indianapolis, IN 46256

MEMO 1039

\*002148\* \*074006674\* 1373430\*

Check 2148 Amount \$200.00 Date 6/3/2013

**MH EQUITY MANAGING MEMBER LLC**  
1120 LAURELWOOD  
Carmel, IN 46033-8747

NATIONAL BANK OF INDIANAPOLIS  
20-807740

2149

6/12/2013

PAY TO THE ORDER OF **Austrakian Gold, LLC**

Six Hundred Eighty-Eight and 49/100 \*\*\*\*\*

\$ 688.49

DOLLARS

Austrakian Gold LLC  
PO Box 713524  
Cincinnati, OH 45271-3521

MEMO Cref. C00340761

\*002149\* \*074006674\* 1373430\*

Check 2149 Amount \$688.49 Date 6/18/2013

**MH EQUITY MANAGING MEMBER LLC**  
1120 LAURELWOOD  
Carmel, IN 46033-8747

NATIONAL BANK OF INDIANAPOLIS  
20-807740

2150

6/12/2013

PAY TO THE ORDER OF **Ruder Ware L.L.C.**

Three Thousand Twenty-One and 50/100 \*\*\*\*\*

\$ 3,021.50

DOLLARS

Ruder Ware, L.L.C.  
P.O. BOX 8050  
Winneba, WI 54482-8050

MEMO Matter 44724-00001

\*002150\* \*074006674\* 1373430\*

Check 2150 Amount \$3,021.50 Date 6/18/2013





THE NATIONAL  
BANK & INDIANAPOLIS

MH EQUITY MANAGING MEMBER LLC  
DEBTOR-IN-POSSESSION  
1120 LAURELWOOD  
CARMEL IN 46032

Date 6/28/13 Page 1 of 1  
Account Number 1535871  
Enclosures

----- CHECKING ACCOUNTS -----

CIRCLE BUSINESS		Number of Enclosures	0
Account Number	1535871	Statement Dates 6/27/13 thru	6/30/13
Previous Balance	.00	Days in the statement period	4
Deposits/Credits	.00	Average Ledger	0
Checks/Debits	.00	Average Collected	0
Service Charge	.00		
Interest Paid	.00		
Ending Balance	.00		

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Daily Balance Information  
Date Balance  
6/27 .00